

08-05-04

RCE  
2635

16966-00002  
PATENT



IN THE UNITED STATES OFFICE OF PATENTS AND TRADEMARKS

Applicant: Tamori

Serial Number: 09/424,685

Filed: January 11, 2000

For: INFORMATION  
RECORDER/PROCESSOR AND  
EQUIPMENT/SYSTEM  
CONTROLLER BOTH  
PROVIDED WITH FINGERPRINT  
SENSOR

Art Unit: 2635

Examiner: C. Yang

**CERTIFICATE OF MAILING BY EXPRESS MAIL TO  
THE COMMISSIONER OF PATENTS AND TRADEMARKS**

Express Mail mailing label number: EL 977 940 432 US

Date of Mailing: August 4, 2004

I certify that the documents listed below:

- Certificate of Express Mailing (1 page)
- Request for Continued Examination Transmittal (1 page, in duplicate)
- Amendment Transmittal (3 pages, in duplicate)
- Amendment in response to Office Action February 5, 2004 (18 pages)
- Return post card

**RECEIVED**

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are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above in an envelope addressed to: Mail Stop: RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Alan L. Cassel  
Reg. No. 35,842  
ARMSTRONG TEASDALE LLP  
One Metropolitan Square, Suite 2600  
St. Louis, MO 63102-2740  
(314) 621-5070



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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

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TRANSMITTAL

1. Transmitted herewith is:

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STATUS

2. Applicant

☒  
☐

claims small entity status.  
is other than a small entity.

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Alan L. Cassel, Reg. No. 35,842

### EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) ☒ Applicant petitions for an extension of time under 37 C.F.R. 1.136  
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
<input type="checkbox"/> first month	\$ 110.00	\$ 55.00
<input type="checkbox"/> second month	\$ 420.00	\$ 210.00
<input checked="" type="checkbox"/> third month	\$ 950.00	\$ 475.00
<input type="checkbox"/> fourth month	\$1,480.00	\$ 740.00
<input type="checkbox"/> fifth month	\$2,010.00	\$1,005.00
	Fee Due	\$ 475.00

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

- ☐ An extension of \_\_\_\_\_ months has already been secured. The fee paid therefor \$\_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ \_\_\_\_\_.

**OR**

- (b) ☐ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

### FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	SMALL ENTITY		OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDITIONAL RATE FEE	OR	ADDITIONAL RATE FEE
TOTAL		MINUS		=	x \$9 = \$		x \$18 = \$
INDEP.		MINUS		=	x \$43 = \$		x \$86 = \$
____ FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$145 = \$		+ \$290 = \$
					TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$

(a) ☒ No additional fee for Claims is required

**OR**

(b) ☐ Total additional fee for claims required \$

**FEE PAYMENT**

5.        Attached is a check in the sum of \$           

☒ Charge Deposit Account No. 01-2384 the sum of \$475.00.  
A duplicate of this transmittal is attached.

**FEE DEFICIENCY**

6. ☒ If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

**AND/OR**

☒ If any additional fee for claims is required, charge Deposit Account No. 01-2384.

7. ☐ Other:



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